PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Leave The Poor Man's Tiny Hands Alone PAC 1621 NE Killingsworth St. ADDRESS (number and street) Apt. 7 (Check if address is changed) Portland 97211 OR CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS leavehispoorlittlehandsalone@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00612788 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Stephen Judkins Type or Print Name of Treasurer Stephen Judkins [Electronically Filed] 03 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FFC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	i aye Z
Can	ndidate	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.	)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	(5)
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.		
	3.	FEC ID number	
	4.		

FEC <b>Form 1</b> (Revised (	02/2009)	Page <b>3</b>
Write or Type Committee Name		. ago o
Leave The Poo	r Man's Tiny Hands Alone PAC	
	Organization, Affiliated Committee, Joint Fundraising Represent	tative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STA	TE ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Repre	esentative Leadership PAC Sponsor
<ol> <li>Custodian of Records: Iden books and records.</li> </ol>	ntify by name, address (phone number optional) and position of	the person in possession of committee
Stephen Ju	udkins	
Mailing Address	1621 NE Killingsworth St.	
Mailing Address	Apt. 7	
	Portland	R 97211
Title or Position	CITY STAT	E ZIP CODE
Treasurer	Telephone number	
3. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the comrassistant treasurer).	mittee; and the name and address of
Full Name Stephen Ju	udkins	1
of Treasurer	1621 NE Killingsworth St.	
Mailing Address		
	Apt. 7	0.1 107214
	Portland OI CITY STAT	
Title or Position Treasurer		
<u> </u>	Telephone number	

	m 1 (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
-		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other	Depositories: List all banks or other depositories in which the committee deposits funds, he	olus accounts, rents
Name of Bank, Mailing Address	US Bank  636 SE Grand Ave	
Name of Bank,	Depository, etc.  US Bank  1636 SE Grand Ave	1
Name of Bank,	Depository, etc.  US Bank  636 SE Grand Ave	ZIP CODE
Name of Bank,	Depository, etc.  US Bank  636 SE Grand Ave  Portland  OR  97214  CITY  STATE	
Name of Bank, Mailing Address	Depository, etc.  US Bank  636 SE Grand Ave  Portland  OR  97214  CITY  STATE	
Name of Bank, Mailing Address	Depository, etc.  US Bank  636 SE Grand Ave  Portland  CITY  STATE  Depository, etc.	
Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  US Bank  636 SE Grand Ave  Portland  CITY  STATE  Depository, etc.	
Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  US Bank  636 SE Grand Ave  Portland  CITY  STATE  Depository, etc.	

## : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1N Transaction ID:

We are concerned citizens who believe we give our enemies a potentially catastrophic head start by discussing the poor man's tiny hands.

Form/Schedule: Transaction ID: